

Brook Property, adjacent to the Great Swamp National Wildlife Refuge, which provides critical habitat for numerous rare species.

NATIONAL DEFENSE AUTHORIZATION ACT FOR FISCAL YEAR 2010

SPEECH OF

HON. LYNN C. WOOLSEY

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 24, 2009

The House in Committee of the Whole House on the State of the Union had under consideration of the bill (H.R. 2647) to authorize appropriations for fiscal year 2010 for military activities of the Department of Defense, to prescribe military personnel strengths for fiscal year 2010, and for other purposes:

Ms. WOOLSEY. Mr. Chair, while I cannot support H.R. 2647, this legislation does contain important provisions regarding family and medical leave for military families.

Last session, Congress passed—also in a Defense Authorization bill—legislation to provide military families with up to 26 weeks of leave under the Family and Medical Leave Act (FMLA) to care for injured servicemembers. I had introduced this bill in the House, and its provisions implement one of the recommendations of the President's Commission on Care for America's Returning Wounded Warriors, chaired by Secretary Donna Shalala and Senator Bob Dole.

Also included in the final legislation was an amendment introduced by Representative ALTMIRE (with then Representative UDALL) to provide up to 12 weeks of leave for military families who need this leave to deal with qualifying exigencies arising out of the deployment of a servicemember to Iraq or Afghanistan.

Once this legislation became law, and the Bush Department of Labor issued regulations, we realized that corrections needed to be made to these FMLA provisions to truly effectuate their purpose to assist military families when these families need time off from work. Section 585 of H.R. 2647 does just that; and clarifies:

That family members of certain seriously ill and injured veterans are entitled to the 26 weeks of leave; and

That the family members of regular active servicemembers (and not just reservists and members of the national guard) are entitled to 12 weeks of leave for "exigencies" when they are deployed away from home.

Finally, Section 585 provides that exigency leave will be available when a servicemember is to be deployed anywhere overseas and not just overseas in support of a contingency operation (e.g. Iraq or Afghanistan).

The FMLA is intended to help individuals balance their family and work obligations. Millions of working people are now eligible for unpaid job protected leave. When the Act was passed in 1993, it was a giant step and is of great importance to working families.

Since a majority of military spouses work, they too must balance work and family. They work to put food on the table and support their families. But they face additional challenges because their lives are disrupted by multiple deployments, involving not only reservists and members in the National Guard, but those servicemembers in regular active duty as well.

The conflicts in Iraq and Afghanistan have resulted in over 34,000 casualties with many servicemembers being seriously wounded. These injured warriors need substantial support and care from their families, often for long periods of time, and some permanently. In addition, a recent Pentagon study found that 11 percent of Iraq veterans and 20 percent of Afghanistan veterans suffer from post-traumatic stress syndrome, an often disabling condition.

The expansion of the FMLA to include leave for military families was much needed. The provisions of Section 585 in H.R. 2647 help clarify the original intent of the law.

SUPPORTING HEALTH REFORM

HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 25, 2009

Mr. STARK. Madam Speaker, this past Sunday my colleague from Pennsylvania, ALLYSON SCHWARTZ, addressed the issue of health reform in a guest editorial for the Philadelphia Inquirer. In her piece she laid out an indisputable case for why the current healthcare system has become unacceptable for Americans and what we must do to fix it. I encourage all of my colleagues to read the article and to work in the coming months to ensure that we enact affordable, quality health care for all.

[From the Philadelphia Inquirer June 21, 2009]

OP-ED HEADLINE: FIXING HEALTH CARE

Health-care reform is the number-one issue my constituents raise with me, and a leading concern of business owners. For Democrats in Congress, health-care reform is a moral and an economic imperative.

American families are facing inadequate health coverage, mounting bills, and lack of access to care. They like their doctors and appreciate the quality of care provided by their hospitals. But, they have deep worries that their current coverage may change suddenly and limit access to their doctor or to needed benefits.

Business owners are struggling to pay for health benefits for their workers, forcing them to pass greater costs to employees or drop coverage.

Increasing costs for the federal government are neither sustainable, nor producing the health outcomes they should. Taxpayers pay 46 percent of our nation's \$2.5 trillion health-care costs. And, just as in the private market, costs are skyrocketing. The share of our GDP devoted to health-care spending has doubled in the last 20 years, threatening our budget stability.

The status quo is unacceptable and unsustainable. We must do a better job to contain costs for families, businesses, and the government, and to ensure meaningful, affordable coverage for all Americans.

Can we? I believe we can by keeping what works, fixing what doesn't, and demanding quality care and greater value for our dollar.

In the first three months of this new administration, we did more to strengthen health care than in the prior decade. We expanded affordable health coverage to 11 million American children, took major steps to modernize medicine through health-information technology, invested significantly in lifesaving medical research, and ensured that U.S. workers and their families hurt hardest by this recession continue to have access to health coverage when they lose a job.

Building on these achievements, we can find a uniquely American solution to cost, coverage, and quality. This is essential if our businesses are to be economically competitive, our people healthier, and our federal budget balanced.

Here's what we should do:

First and foremost, we start with the acknowledgment that health care is a shared responsibility. Every American will be expected to get health coverage and employers will have to provide coverage or help pay to cover the cost of the uninsured.

As President Obama has said, if you have coverage, and you like it, you can keep it. This means work-based coverage for most Americans, Medicare for seniors, Medicaid for our poorest and sickest, and continued benefits for veterans.

For the nearly 50 million uninsured Americans, many of whom are working families, we will help you buy either private or public coverage. While everyone will have to pay part of their premiums, partial subsidies on a sliding scale will be established and can be used to buy either private or public insurance.

To ensure affordable, meaningful coverage, we will change the ground rules in the insurance market. Denying coverage or charging more for preexisting conditions, health status, or sex is going to stop. Insurers will have to simplify terms and procedures. And, we expect insurers to pass those savings along to their consumers.

Next, we know that in order to control costs and improve health-care outcomes, delivery of health services must be more efficient, more accountable, and better coordinated. Changes in Medicare and the new public-insurance option will create choices for patients to find primary-care providers and will mean better continuity of care for those with chronic diseases. We will gather, analyze, and disseminate information on best practices to doctors, nurses, and health providers, and then expect them to use it. And, we must have a renewed focus on primary care, encouraging future health-care providers to enter the field and working to ensure their excellence.

Third, we have to strengthen our commitment to innovation and technology. Americans have always been scientists and innovators, and we must keep investing in the next generation of medicines, technologies, devices, and cures.

Finally, without increased personal responsibility, Americans will not be healthier. We must take greater responsibility in the way we get health care and the way we take care of ourselves. If we don't, we all pay the consequences—from lost productivity, to the cost of expensive care, to personal pain and suffering.

Setting our nation toward a healthier, more economically competitive future will take fair and responsible financial investment. We are committed to covering the cost of health reform. To do so, we will consider means that are appropriate, fair, shared, and the least disruptive to economic growth and financial security for our families. The president has asked that those making under \$250,000 not be burdened by higher taxes. These are the parameters; the decisions will be difficult, but ones that you have entrusted to us.

Much of the cost of health-care reform will come from savings within the system. Reducing hospitalizations, duplicative testing, and medical errors, ending the current overpayments to private insurance companies that contract with Medicare, and insisting on better prices for prescription drugs for seniors will result in hundreds of billions of dollars of savings.

Besides the significant dollars that will come from savings and new premiums paid

by those currently uninsured, stakeholders in health care, including insurance companies, hospitals, doctors, pharmaceutical companies, medical-device manufacturers, have committed to reducing costs by \$2 trillion over 10 years. These savings should be passed along to consumers.

There will always be naysayers who say these decisions are too hard, that health-care reform cannot be done, but I believe that today even "Harry and Louise," who helped stop reform before, would tell us reform is a necessity. If our businesses are to be economically competitive, our families healthier, and our government fiscally sound, we must find a uniquely American solution to our health-care challenges.

The time to act is now.

PERSONAL EXPLANATION

HON. TIMOTHY V. JOHNSON

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 25, 2009

Mr. JOHNSON of Illinois. Madam Speaker, on rollcall No. 425, I was present on the floor, but due to a malfunction, my vote was not recorded.

Due to insufficient time to consider the subject before us, adjournment was the most responsible alternative. Thus my vote below would be in the affirmative.

Had I been present, I would have voted "yes."

EARMARK DECLARATION

HON. DAVID DREIER

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 25, 2009

Mr. DREIER. Madam Speaker, pursuant to the Republican Leadership standards on earmarks, I am submitting the following information regarding earmarks I received as part of H.R. 2996, the Fiscal Year 2010 Interior, Environment and Related Agencies Appropriations Act:

Requesting Member: Congressman DAVID DREIER

Bill Number: H.R. 2996, the Fiscal Year 2010 Interior, Environment and Related Agencies Appropriations Act

Account: EPA STAG Water and Wastewater Infrastructure Project

Legal Name of Requesting Entity: City of Arcadia, California

Address of Requesting Entity: 240 West Huntington Drive, Arcadia, CA 91066

Description of Request: Provide an earmark of \$500,000 for the cities of Arcadia and Sierra Madre for their Joint Water Infrastructure Projects. Arcadia's project will provide for the portion of the construction cost for the Baldwin Reservoir Rehabilitation Project (\$250,000). This project will provide for structural reinforcement of the existing reinforced concrete reservoir to be able to withstand a seismic event as identified in the Corps Seismic Reliability Study in 1997. Sierra Madre's project will provide for the portion of the construction cost for its Water Supply Well Project (\$250,000). This project will replace an existing well with a new high capacity well to provide for groundwater supply reliability. Each

city will provide a 45% local match to the 55% EPA STAG funding, as required.

EARMARK DECLARATION

HON. LEONARD LANCE

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 25, 2009

Mr. LANCE. Madam Speaker, pursuant to the Republican Leadership standards on earmarks, I am submitting the following information regarding earmarks I received as part of H.R. 2647—National Defense Authorization Act for Fiscal Year 2010:

Authorized Amount: \$4,800,000.00

Project Name: Tactical Metal Fabrication (TacFab)

Funding Account/Service: RDA, Army

PE Number: 0602601A, Combat Vehicle and Automotive Technology Line Number: 13
Intended Recipient: SeaBox Inc., 450 Black Horse Lane, No. Brunswick, NJ 08902

The TacFab system, which is currently under development, will demonstrate a tactically mobile rapid metal fabrication capability that will be a companion unit to the Mobile Parts Hospital to provide spare and replacement parts to our Warfighters in theater, and also as a stand-alone, metal casting resource provided to domestic organic Army depots and industrial facilities in support of RESET activities. This final increment for FY 2010 will result in a mobile, rapidly deployable asset, both in theater and within the U.S. in support of RESET operations. Once fully configured, the Army expects a 5x–10x reduction in delivery times for poured metal part base shapes using TacFab versus conventional procurement processes.

TacFab's containerized, mobile foundry to the U.S. Army allows deployed forces to produce spare and replacement parts in the field. This cuts the order time from weeks or months to 24 hours. Funding for this project will provide our troops with the parts they need to effectively complete their missions. Additionally, the system can be deployed at depots in CONUS assisting in RESET as currently exists. TacFab will reduce time waiting for parts and cut costs for DoD while ensuring our troops have the weapons they need as soon as they need them so they may effectively complete their missions.

IN HONOR OF DR. GOFF

HON. SAM FARR

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 25, 2009

Mr. FARR. Madam Speaker, I rise today to recognize the outstanding life-work of Dr. Lynda J. Goff. Dr. Goff has served with distinction as a Professor of Ecology and Evolutionary Biology at the University of California, Santa Cruz for more than 30 years. Dr. Goff has decided to take the next step in her life, and is retiring from the University of California. While she will no longer be a faculty member, her legacy of outstanding dedication to California and the scientific community at large shall be persistent.

Dr. Goff is a devoted and truly inspiring biology teacher. In the tenure of over three dec-

ades, she has taught 10,000 university students, and has supervised the research of more than 100 graduate students. Her noteworthy achievements include teaching and researching molecular plant and marine biology on all seven continents. She has the honor of having significantly contributed to seven expeditions to Antarctica and twenty in the Arctic. Her exemplary teaching led her to serve in the distinguished role of Vice Provost and Dean of Undergraduate Education from 1999 to 2004, and subsequently as the first director of the "California Teach" program. Dr. Goff played a pivotal role in creating this program, established to increase the number of highly trained K–12 science and mathematics teachers in California—something our nation desperately needs. She dedicated herself wholeheartedly to ensure that California, and indeed our great Nation, increases its competitiveness in math and science in the 21st Century.

Professor Goff has received national and international recognition for her scientific research, much of which has centered on cell-cell and genome interaction in algae and the evolution of parasitism. Dr. Goff has been a solid pillar in the Monterey Bay community for years; not only as a distinguished professor, but also as an elementary science teacher, a naturalist and photographer. Her work embodies what California's central coast prides: experiencing the beauty of nature, seeking to understand the mysteries of our oceans' flora and fauna and giving back to the community to ensure our posterity's brighter future.

I would like to thank her for her meritorious service to California and commend her for her many accomplishments.

EARMARK DECLARATION

HON. SHELLEY MOORE CAPITO

OF WEST VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 25, 2009

Mrs. CAPITO. Madam Speaker, pursuant to the Republican Leadership standards on earmarks, I am submitting the following information regarding earmarks I received as part of H.R. 2874, Commerce, Justice, Science, and Related Agencies Appropriations Act, 2010.

Awarded under: COPS TECH GRANT, Kanawha Prosecutors Case Management, Kanawha County Prosecuting Attorney, 700 Washington Street, East Charleston, WV 25301.

This project would allow for the cost of implementation of the case management system, integration of the system with law enforcement and hardware needed for both systems.

Awarded under: COPS TECH GRANT, Spencer PD Computer System, Spencer Police Department, 116 Court St., Spencer, WV 25276.

Funding will be used to purchase a computer system for processing criminals and case management.

Awarded under: COPS TECH GRANT, Weston Police Department Technology Upgrade, Weston Police Department, 102 West 2nd Street, Weston, WV 26452.

Funding would help establish a computer network in all police vehicles that is networked with the 911 center and the Weston Police Department and surrounding counties.

Madam Speaker, pursuant to the Republican Leadership standards on earmarks, I am